



PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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Insert Title:	Topical compositions associating sodium hyaluronate fragments and reti						
Fill in Appropriate	useful for cosmetic and medical dermatology the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:						
Information -	The specification was filed onas						
For Use Without	United States Application Number						
Specification	and amended on	was filed on O	1/27/2005		(ii upplied	as PCT	
Attached:	International Ap	plication Number	DCT/ED2	005/00176	(i	; and was	
•	amended on		101/TKZ	005700170	(i	f applicable)	
·	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the						
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Insert Priority	0400826	FRANC	E	01/29/2004	¥ X□		
Information: (if appropriate)	(Number)	(Country)		(Month/Day/Year Fi			
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	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.						
Insert Provisional Application(s): (if any)	(Application Number)	-	(Filing Date)			
	(Application Number) (Filing Date)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
.00.	Country		Application Number	Date of	Filing (Month/Day/Yea	r).	
Insert Requested Information: (if appropriate)							
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
Insert Prior U.S. Application(s): (if any)	(Application Numbe	r)	(Filing Date)	(Status	- patented, pending, aban	ndoned)	
Page 1 of 2 (Rev. 05/2004)	(Application Numbe	r)	(Filing Date)	(Status	- patented, pending, abar	ndoned)	

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

•								
Il Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME Jean-Hilaire SAURAT	INVENTOR'S SCHATURE		DATE*				
Ill Name of First or Sule Inventor: sert Name of Inventor → sert Date This Dx:ument is Signed	Jean-Hildite SAURAI	1/ML		18/07/2006				
sert Residence	Residence (City, State & Country)	7	CITIZENSHI					
sert Citizenship →	GENEVE-Switzerland	•	French					
sert Post Office	MAILING ADDRESS (Complete Street Addr	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	2, Place Reverdin, 1206 GENEVE-SWISS							
all Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Gûrkan KAYA	G.Clan-		18/07/2006				
	Residence (City, State & Country)	\sim	CITIZENSHI	P				
	GENEVE-Switzerland	<u> </u>	Swiss					
	MAILING ADDRESS (Complete Street Add	ress including City, State & Country)	<u> </u>					
	2, chemin de la Normandie, 1206	GENEVE-SWILZERIANG						
ull Name of Third Inventor, it any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above	Pascal BORDAT			18/07/2006				
	Residence (City, State & Country)		CITIZENSHI					
	MERVILLA - FRANCE		French					
	MAILING ADDRESS (Complete Street Address including City, State & Country) 2, Chemin de l'Eglise, 31320 MERVILLA - FRANCE							
	2, Chemin de l'Eqlise, 31320 ME	SKAIDDY - LKWICE						
ull Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)		CITIZENSHI	P				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Full Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)		CITIZENSHI	P				
	1							
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Full Name of Sixth Inventor, if any: say above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)		CITIZENSH	IP .				
	MAILING ADDRESS (Complete Street Add	dress including City, State & Country)						
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Page 2 of 2 (Rev. 05/2004)

*DATE OF SIGNATURE

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Insert Title:	Topical comp	ositions a	associating s	odium hyaluronate	fragments a	nd retin		
Fill in Appropriate	useful for cosmetic and medical dermatology the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:							
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For Use Without	United States Ap	oplication Number				;		
Specification	and amended or	1	105/0005		(if applicable) a	ind/or		
Attached:	the specification	was filed on	01/2//2005			as PCI		
	the specification was filed on 01/27/2005 International Application Number PCT/FR2005/00176 amended on				(if appl	icable)		
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	Prior Foreign Appl			01 100 10001	Priority Cla	anneu		
Insert Priority	0400826	FRAN	CE	01/29/2004	X			
nformation: if appropriate)	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
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	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
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Application(s): (if any)	(Application Number	r)		(Filing Date)				
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Application(s):	(Application Number	r)	(Filing Date)	(Status - patente	d, pending, abandoned	')		
if any)								
Page 1 of 2	(Application Number	r)	(Filing Date)	(Status - patente	d, pending, abandoned	1)		
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ull Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME Jean-Hilaire Saurat	INVENTOR'S SIGNATURE		DATE*		
ull Name of First or Sole Inventor: sert Name of Inventor sert Date This Document is Signed	Jean-Hilaire SAURAT			18/07/2006		
nsert Residence nsert Citizenship>	Residence (City, State & Country) GENEVE-Switzerland					
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country) 2, Place Reverdin, 1206 GENEVE-SWISS					
ull Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Gürkan KAYA	INVENTOR'S SIGNATURE		DATE* 18/07/2006		
	Residence (City, State & Country) GENEVE-Switzerland		CITIZENSHII Swiss			
	MAILING ADDRESS (Complete Street Ad 2, chemin de la Normandie, 120	dress including City, State & Country) 6 GENEVE-Switzerland				
ull Name of Third Inventur, if any: see above	GIVEN NAME/FAMILY NAME Pascal BORDAT	INVENTOR'S SIGNATURE		DATE*18/U7/2006		
	Residence (City, State & Country) MERVILLA - FRANCE		CITIZENSHII French			
	MAILING ADDRESS (Complete Street Ad 2, Chemin de l'Eqlise, 31320 M	dress including City, State & Country) MERVILLA - FRANCE		·		
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